



Town of Goldsby
Address Request

(405) 288-6675

Name of Resident:

Current Mailing Address:

Daytime Phone Number:

Legal Description: Township: _____ Range: _ Section: _____
Subdivision: _____ Lot: _____ Block _____
Coordinates: Latitude 35. _____ Longitude: -97. _____

Driving Directions:

(From a marked intersection)

Description of Structure: _____

(Color, features, etc.)

Name of Road Driveway Intersects: _____

Signature

Date

(Office use only) Address _____ Date _____ By _____

Please Post Your Address!